



State of New Hampshire 2005 ANNUAL REPORT

The following information shall be given as of January 1
preceeding the due date Pursuant to RSA 293-A:16.22.

REPORT DUE BY April 1, 2005

ANNUAL REPORTS RECEIVED AFTER THE DUE DATE
WILL BE ASSESSED A LATE FEE.

ACCU TEMP SERVICES, INC.

PO BOX 3324

N CONWAY , NH 03860

ADDRESS OF PRINCIPAL OFFICE:

PO BOX 3324

N CONWAY , NH 03860

REGISTERED AGENT AND OFFICE:

MICHAEL A FOURNIER

REPORTER COURT PO BOX 3324

NORTH CONWAY , NH 03860

ENTITY TYPE: CORPORATION

BUSINESS ID: 229893

STATE OF DOMICILE: NEW HAMPSHIRE

FEDERAL ID: 020481729

HVAC CONTRACTING & SUBCONTRACTING; ETC.

If changing the mailing or principal office address, please check the appropriate box and fill in the necessary information.

☒ The new mailing address Michael Fournier 65 Providence Brook Road Chatham, NH 03813

☐ The new principal office address _____

PO Box is acceptable.

OFFICERS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).
(MUST LIST AT LEAST ONE OFFICER BELOW)

NAME Paul Fournier
STREET 48 Independence Drive
CITY/STATE/ZIP Freetown NH 03836
NAME Michael Fournier
STREET 65 Providence Brook Road
CITY/STATE/ZIP Chatham, NH 03813
NAME _____
STREET _____
CITY/STATE/ZIP _____
NAME _____
STREET _____
CITY/STATE/ZIP _____

BOARD OF DIRECTORS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).
(MUST LIST AT LEAST ONE DIRECTOR BELOW)

NAME _____
STREET _____
CITY/STATE/ZIP _____
NAME _____
STREET _____
CITY/STATE/ZIP _____
NAME _____
STREET _____
CITY/STATE/ZIP _____

NAMES AND ADDRESSES OF ADDITIONAL OFFICERS AND DIRECTORS ARE ATTACHED

To be signed by an officer, director, or any other person authorized by the board of directors.
I, the undersigned do hereby Certify that the statements on this report are true to the best of my information, knowledge and belief.

Sign here:

Please print name and title of signer:

NAME

TITLE

FEE DUE: \$150.00

E-MAIL ADDRESS (OPTIONAL):

WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A
PUBLIC DOCUMENT AND ALL INFORMATION CONTAINED HEREIN IS SUBJECT TO PUBLIC DISCLOSURE

REQUIRED INFO:

State of New Hampshire
Fee - Form 47 - (Corporations) 1 Page(s)

PORT WILL BE REJECTED

, NH 03108-9529



T0521045091